

Detroit Health Department

Notice of Health Information Practices Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA)

Under the Health Insurance Portability and Accountability Act (HIPAA) of 1996 The Detroit Health Department must notify you how information about you may be used or disclosed, and how you can access this information.

PLEASE READ CAREFULLY

Your medical record is a legal document, and belongs to the Agency that collected the information. However, the health and personal information contained in the record belong to you.

Under Federal Law, the Detroit Health Department (DHD) is required to:

Maintain the privacy of your health information.

Notify you of legal duties and privacy practices.

Accommodate reasonable requests to communicate information to other locations.

Not disclose information without written authorization, except as required by law.

HOW HEALTH INFORMATION ABOUT YOU MAY BE USED:

To contact you as a reminder of an appointment for treatment or care.

To arrange & coordinate referrals for treatment, health services, care operating practices, or to obtain payment.

To review treatments and services, and to evaluate staff performance.

To combine health information about many patients to determine services offered, and to evaluate new treatments.

HOW HEALTH INFORMATION MAY BE DISCLOSED:

- a) To doctors, nurses technicians, social workers, dietitians and other personnel for review, healthcare management and learning purposes. Health information may be disclosed for required reporting purposes or so others can study it, but only in summary, statistical, or other forms which do not identify individuals.
- b) To oversight agencies for audit, investigations, inspections and licensure. These activities are necessary for the government to monitor the health care system, government programs and compliance with Civil Rights Laws.
- c) To answer a Court order, Administrative Order or in response to a Subpoena, Discovery Request or other legal procedures involved in a legal dispute, but only if efforts have been made to tell you about the information request.
- d) To a coroner or medical examiner, if necessary to identify a deceased person or to determine the cause of death. Health information about you may also be released to funeral directors as necessary to carry out their duties.
- e) The DHD may release Protected Health Information about you for Public Health Activities, including the following: to prevent or to control disease, injury or disability; to report birth, death, child neglect or abuse, adverse reactions to medications or to recall products; to notify you of exposure to a disease or the risk of contracting a condition or spreading a disease.

HOW TO ACCESS HEALTH INFORMATION:

- a) You have the right to look at or get a copy of your health information that is used to make decisions about your healthcare. If you request a copy of your medical record, there is a \$20 fee, and you must sign an authorization for the release of your health information. There is no fee for a copy of your health information to be mailed to another medical provider or health facility, with your signed authorization to release your medical record.
- b) You have a right to request, with a signed authorization, that your health information be sent in a confidential manner by mail to an address other than your home.
- c) If you believe that information in your medical record is incorrect or important information is missing, you have a right to request correction of the existing information or add the missing information.
- d) You may also request in writing that the DHD not use or disclose your information for treatment, payment, or administrative purposes or to persons involved in your care except when specifically authorized by you, when required by law, or in emergency circumstances. The DHD will consider but is not legally required to accept this request.
- e) You have a right to refuse to provide consent for use of your protected health information for purposes of treatment, payment and health care operations. If you decide to do so, the DHD may refuse to accept you as a patient. The DHD reserves the rights to change operation practices and make the new provisions effective for all protected health information. If any significant changes in practices are made then new notices will be posted. You may request a copy of this Notice of Privacy Rights at any time.
- f) If you believe your rights have been violated, you may file a complaint with the Detroit Health Department's HIPAA Privacy Officer, (313) 876-4000, or the Secretary of the United States Department of Health and Human Services, the Federal Department responsible for ensuring implementation of the protected information provisions of the Health Insurance Portability and Accountability Act of 1996.

